

Always a Soldier Employment Information Form

Please fill out the form below and submit to the Program Manager, Ms. Debra Coleman, at HQ, AMC, debra.y.coleman@us.army.mil to see if you qualify for the program. Provide a copy of following documents with your information form. Resume, DD Form 214, and a copy of your Veterans Affairs disability rating, if applicable.

*Denotes required fields

* Personal Information

First Name Middle Initial Last Name

*Contact Information

E-mail: _____

Address Line 1 _____

Address Line 2 _____

City: _____

State: _____

Zip Code: _____

Country _____

Home Phone _____

Work Phone _____

Cell Phone _____

Ethnic/Racial Background _____

**Please indicate best number
to contact you at**

*Military information

Which best describes you: Active Military Veteran Other

* Are you currently a fulltime Federal Government Employee

Yes/No

If you are currently a fulltime hire with the Federal Government you will not be considered for this program.

*Select Branch of Service

Air Force, Air Force Reserves, Army, Army Reserves, Coast Guard, Marine Corps, Marine Reserves, National Guard Navy

*Title/Rank at time of separation _____

* Length of Service _____

Discharge date (DD/MM/YYYY) _____

Occupational specialty / MOS _____

*Education

Highest education achieved Select High School Graduate High School GED

Some College - 2 YRS College - 4 YRS College - 6 YRS

*Job Experience

Summarize your job experiences

*** Resume**

Additional Information

Are you a U.S. citizen?

***Area of preference (State/AMC location) desired to be hired
at** _____

Would you consider a temp or a term position: Yes/No

What is the lowest grade you are willing to accept? _____

***Are you willing to relocate? Yes/No**

***Are you a disabled Veteran? Yes or No**

***What is Your VA Rating:** _____

Will reasonable accommodations be required? **Yes/No**

Explain

Provide any additional information about your work and education experiences, personal interests, and educational and employment goals.

* **The Always a Soldier program seeks to assist our nations injured/wounded warfighter. In effort to protect the dignity of the program, please briefly discuss your service connected disability (ex. Wounded in action-shot in arm).

***How did you hear about us? Please circle at least one**

VA, DAV, Wounded Warrior Project _____ Name/Location

Case Manager _____ Name/Location

From a Friend _____ Name

Career Fair _____ Location

Other

Please sign below to indicate that you have read and understand the Privacy Act Statement

_____.

If you have additional questions please contact Ms. Debra Coleman, voice (703) 806-8140, or email Debra.y.coleman@us.army.mil. You may also fax your documents to 703 806-8860 attention Debra Y. Coleman.

Privacy Act Statement:

This information is collected under the authority of 35 USC 2 and 122. This information is also being collected in conjunction with the provisions of the Government Paperwork Elimination Act. This information will only be used by the U.S. Patent and Trademark Office (USPTO) staff to issue and revoke digital certificates and to recover keys. It is requested that you supply this information so that the USPTO can authorize the creation of a digital certificate. This digital certificate enables the USPTO to issue the cryptographic "keys" necessary to provide you with a digital identity and to support encrypted communication between you and the USPTO. This information will be used to construct a unique name (distinguished name) and to communicate with you about the certificate grant and software distribution process. Furnishing the information on this form is voluntary, but failure to do so may result in disapproval of this request.

The information provided by you in this form will be subject to the following routine uses:

1. This information may be disclosed to Federal, state, local, or foreign agencies responsible for investigating, prosecuting, enforcing, or implementing laws, contracts, rules, or regulations, if these records indicate a violation or a potential violation of a law or contract. These violations or potential violations can be civil, criminal, or regulatory in nature and can arise from general or particular program statutes or contracts, rules, regulations, or from the necessity of protecting an interest of the Department.
2. A record from this system of records may be disclosed to a Federal, state or local agency maintaining civil, criminal or other relevant enforcement information or other pertinent information, such as current licenses, if necessary to obtain information relevant to a Department decision concerning the assignment, hiring or retention of an individual, the issuance of a security clearance, the letting of a contract, or the issuance of a license, grant or other benefit.
3. A record from this system of records may be disclosed in the course of presenting evidence to a court, magistrate, or administrative tribunal, including disclosures to opposing counsel in the course of settlement negotiations.
4. A record in this system of records may be disclosed to a member of Congress or to a congressional staff member in response to an inquiry of the Congressional office made at the written request of the constituent about whom the record is maintained.
5. A record in this system of records may be disclosed to the Office of Management and Budget in connection with the review of private relief legislation (as set forth in OMB Circular No. A-19) at any stage of the legislative coordination and clearance process as described in the Circular.
6. A record in this system of records may be disclosed to the Department of Justice to determine whether disclosure is required by the Freedom of Information Act (FOIA).
7. The information may be disclosed to the agency contractors, grantees, experts, consultants, or volunteers who have been engaged by the agency to assist in the performance of a service related to this system of records and who have need to have access to the records in order to perform the activity. Recipients of information shall be required to comply with the requirements of the Privacy Act of 1974, as amended, pursuant to 5 USC 552a(m).
8. The information may be disclosed to the Office of Personnel Management (OPM) for personnel research purposes as a data source for management information, for the production of summary descriptive statistics and analytical studies in support of the function for which the records are collected and maintained, or for related man-power studies.

9. Records from this system of records may be disclosed to the National Archives and Records Administration or to the General Services Administration for records management inspections conducted under 44 USC §§ 2904 and 2906.
10. When a record on its face, or in conjunction with other records, indicates a violation or potential violation of law, whether it is civil, criminal, or regulatory in nature, and whether it arises from a general or particular program statute, a regulation, rule, or order, the record may be disclosed to the appropriate Federal, foreign, state, local or tribal agency, or to other public authorities responsible for enforcing, investigating, or prosecuting violations, or to those agencies charged with enforcing or implementing statutes, rules, regulations, or orders, if it is determined that the information is relevant to any enforcement, regulatory, investigative, or prosecutive responsibility of the receiving entity.